

Declaration and Power of Attorney For Utility or Design Patent Application

特許出願宣言書

Japanese Language Declaration

私は、下欄に氏名を記載した発明者として、以下のとおり
宣言する：

私の住所、郵便の宛先および国籍は、下欄に氏名に統いて記載したとおり
であり、

名称の発明に関し、請求の範囲に記載した特許を求める主題の本来の、
最初にして唯一の発明者である(一人の氏名のみが下欄に記載されている
場合)か、もしくは本来の、最初にして共同の発明者である(複数の氏名が
下欄に記載されている場合)と信じ、

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated
below next to my name.

I believe I am the original, first and sole inventor (if only one name is
listed below) or an original, first and joint inventor (if plural names
are listed below) of the subject matter which is claimed and for
which a patent is sought on the invention entitled

Drug Efflux Pump Inhibitor

the specification of which is attached hereto unless the following
box is checked:

was filed on _____ as

United States Application Number _____

and was amended on _____ (if applicable) or,

PCT International Application Number _____

and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents
of the above identified specification, including the claims, as
amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to
patentability as defined in Title 37, Code of Federal Regulations,
§1.56.

I hereby claim foreign priority under Title 35, United States Code
§119(a-d) or §365(b) of any foreign application(s) for patent or
inventor's certificate, or §365(a) of any PCT international application
which designated at least one country other than the United States,
listed below. I have also identified below, by checking the "No"
box, any foreign application for patent or inventor's certificate, or of
any PCT international application having a filing date before that of
the application on which priority is claimed: Priority claimed
優先権の主張

Prior foreign applications 先の外国出願

(Number) (番号)	(Country) (国名)	(Day/Month/Year Filed) (出願の年月日)
(Number) (番号)	(Country) (国名)	(Day/Month/Year Filed) (出願の年月日)

<input type="checkbox"/>	<input type="checkbox"/>
Yes あり	No なし
<input type="checkbox"/>	<input type="checkbox"/>
Yes あり	No なし

その他の外国特許出願番号は別紙の追補優先権欄にて記載する。

Additional foreign application numbers are listed on a
supplemental priority sheet attached hereto.

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私は、合衆国法典第35部第119条(e)項に基づく、下記の合衆国仮特許出願の利益を主張する。

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

(Application No.) (出願番号)	(Day/Month/Year Filed) 出願の年月日
(Application No.) (出願番号)	(Day/Month/Year Filed) 出願の年月日
(Application No.) (出願番号)	(Day/Month/Year Filed) 出願の年月日

その他の合衆国仮特許出願番号は別紙の追補優先権欄にて記載する。

Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

私は、合衆国法典第35部第120条に基づく下記の合衆国特許出願、又は第365条(c)項に基づく合衆国を指名したPCT国際出願の利益を主張し、本願の請求の範囲各項に記載の主題が合衆国法典第35部第112条第1項規定の態様で、先の合衆国特許出願又はPCT国際出願に開示されていない限度において、先の出願の出願日と本願の国内出願日又はPCT国際出願日の間に有効となった連邦規則法典第37部第1章第56条に記載の特許要件に所要の情報を開示すべき義務を有することを認める。

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(Application No.) (出願番号)	(Day/Month/Year Filed) (出願の年月日)	(現況) (特許済み、係属中 放棄済み)	(Status) (patented, pending, abandoned)
(Application No.) (出願番号)	(Day/Month/Year Filed) (出願の年月日)	(現況) (特許済み、係属中 放棄済み)	(Status) (patented, pending, abandoned)

その他の合衆国又は国際特許出願番号は別紙の追補優先権欄にて記載する。

Additional U.S. or international application numbers are listed on a supplemental priority sheet attached hereto.

私は、ここに自己の知識にもとづいて行った陳述がすべて真実であり、自己の有する情報および信ずるところに従って行った陳述が真実であると信じ、さらに故意に虚偽の陳述等を行った場合、合衆国法典第18部第1001条により、罰金もしくは禁錮に処せられるか、またはこれらの刑が併科され、またかかる故意による虚偽による陳述が本願ないし本願に対して付与される特許の有効性を損なうことがあることを認識して、以上の陳述を行ったことを宣言する。

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

私、下記署名者は、ここに記載の米国弁護士または代理人に本出願に関し特許商標庁にて取られるいかなる行為に関して、同米国弁護士又は代理人が、私に直接連絡なしに私の外国弁護士或いは法人代表者からの指示を受け取り、それに従うようここに委任する。この指示を出す者が変更の場合には、ここに記載の米国弁護士又は代理人にその旨通知される。

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from either his foreign patent agent or corporate representative, if any, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

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委任状： 私は、下記発明者として、下記に明記された顧客番号を伴う以下の弁護士又は、代理人をここに選任し、本順の手続きを遂行すること並びにこれに関する一切の行為を特許商標庁に対して行うことを委任する。そして全ての通信はこの顧客番号宛に発送される。

顧客番号 7055

現在選任された弁護士は下記の通りである。

Neil F. Greenblum	Reg. No. 28,394
Bruce H. Bernstein	Reg. No. 29,027
James L. Rowland	Reg. No. 32,674
Arnold Turk	Reg. No. 33,094

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with the Customer Number provided below to prosecute this application and transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to that Customer Number:

CUSTOMER NUMBER 7055

The appointed attorneys presently include:

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第一のまたは第一の発明者の氏名	Full name of sole or first inventor Kiyoshi NAKAYAMA	
同発明者の署名	日付	Date
住所	Residence	
国籍	Citizenship Japan	
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第2の共同発明者の氏名（該当する場合）	Full name of second joint inventor, if any Masami OHTSUKA	
同第2共同発明者の署名	日付	Date
住所	Residence	
国籍	Citizenship Japan	
郵便の宛先	Post Office Address c/o Daiichi Pharmaceutical Co., Ltd.	
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(第六またはそれ以降の共同発明者に対しても同様な情報
および署名を提供すること。)

(Supply similar information and signature for third and
subsequent joint inventors.)

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第三の共同発明者の氏名	Full name of third inventor, if any Haruko KAWATO		
共同発明者の署名	日付	Third Inventor's signature	Date
住所	Residence		
国籍	Citizenship Japan		
郵便の宛先	Post Office Address c/o Daiichi Pharmaceutical Co., Ltd.		
	Tokyo R&D Center, 16-13, Kita-kasai 1-chome, Edogawa-ku, Tokyo 134-8630, Japan		
第四の共同発明者の氏名	Full name of fourth inventor, if any William WATKINS		
共同発明者の署名	日付	Fourth Inventor's signature	Date
住所	Residence		
国籍	Citizenship Great Britain		
郵便の宛先	Post Office Address 626 Oneida Drive, Sunnyvale, CA 94087, U.S.A.		
第五の共同発明者の氏名	Full name of fifth inventor, if any Jason ZHANG		
共同発明者の署名	日付	Fifth Inventor's signature	Date
住所	Residence		
国籍	Citizenship U.S.A.		
郵便の宛先	Post Office Address 770 Crane Avenue, Foster City, CA 94404, U.S.A.		
第六の共同発明者の氏名	Full name of sixth inventor, if any Monica PALME		
共同発明者の署名	日付	Sixth Inventor's signature	Date
住所	Residence		
国籍	Citizenship Canada		
郵便の宛先	Post Office Address 850 Maude Avenue, Mountain View, CA 94043, U.S.A.		

(それ以降の共同発明者にたいしても同様な情報
および署名を提供すること。)

(Supply similar information and signature for subsequent joint inventors.)

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第七の共同発明者の氏名	Full name of seventh inventor, if any Aesop CHO		
共同発明者の署名	日付	Seventh Inventor's signature	Date
住所	Residence		
国籍	Citizenship U.S.A.		
郵便の宛先	Post Office Address 850 Maude Avenue, Mountain View, CA 94043, U.S.A.		
第八の共同発明者の氏名	Full name of eighth inventor, if any		
共同発明者の署名	日付	Eighth Inventor's signature	Date
住所	Residence		
国籍	Citizenship		
郵便の宛先	Post Office Address		
第九の共同発明者の氏名	Full name of ninth inventor, if any		
共同発明者の署名	日付	Ninth Inventor's signature	Date
住所	Residence		
国籍	Citizenship		
郵便の宛先	Post Office Address		
第十の共同発明者の氏名	Full name of tenth inventor, if any		
共同発明者の署名	日付	Tenth Inventor's signature	Date
住所	Residence		
国籍	Citizenship		
郵便の宛先	Post Office Address		